



12018 South Elm, Suite 111
Jenks, OK 74037
www.empirelease.com
ph 918-712-9300
fx 918-712-0900

BUSINESS

DATE _____

Full Legal Name _____ Date Business Started _____
Billing Address _____ City _____ County _____ State _____ Zip _____
Phone _____ Fax _____ Cell Phone _____ E-mail _____
Type of Business _____ Corp S-Corp LLC Ptnrshp Proprietor
State of Incorporation or Registration _____ Federal ID# _____
Principle's Name _____ %Ownership _____ Title _____ S.S. # _____
Address _____ Zip _____ Phone _____
Principle's Name _____ %Ownership _____ Title _____ S.S. # _____
Address _____ Zip _____ Phone _____

BANK REFERENCES

Please supply minimum two years bank references

Bank _____ Branch _____ Type Account _____ Date Opened _____
Contact _____ Phone _____ Fax _____ Acct.# _____
Bank _____ Branch _____ Type Account _____ Date Opened _____
Contact _____ Phone _____ Fax _____ Acct.# _____
Other Banking Reference _____

OTHER FINANCING

Name _____ Contact _____ Date Opened _____
Phone _____ Fax _____ Acct # _____
Name _____ Contact _____ Date Opened _____
Phone _____ Fax _____ Acct # _____

TRADE REFERENCES

Name _____ Contact _____ Acct# _____
Phone _____ Fax _____ Date Opened _____
Name _____ Contact _____ Acct# _____
Phone _____ Fax _____ Date Opened _____

EQUIPMENT YOU WISH TO FINANCE/LEASE

Description _____ New Used
Address of Equipment Location _____ In City Limits? Yes No
Price without Tax _____ Tax Percentage _____ Requested Contract Term _____
If Used Please State – Year _____ Model _____ S/N _____

VENDOR/DEALER

Name _____ Contact _____
Address including Zip _____ Phone _____ Fax _____

INSURANCE

Agent _____ Contact _____ Phone _____ Fax _____
Address including Zip _____

Everything that I have stated in this application is correct to the best of my knowledge. I understand you will retain this application whether or not credit is approved. You are authorized to check the references listed my personal credit and employment history and to answer questions about your credit experience with me. I understand that my personal guarantee will be required.

APPLICANTS SIGNATURE

DATE

CO-APPLICANT/GUARANTOR/ENDORSER SIGNATURE

X _____

x _____